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Exemptions-	Trusts	XCLUSION (	If yes, complete	Did you, your spo (more than \$10,00	If yes, complete		If yes, complete	Did you, your spo more than \$200 in more than \$1,000	If yes, complete	Did any individua paying you for a :	If yes, complete	Did you or your sor more from any	RELIMINAR	Report Type	Filer Status			JNITED ST
	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse,	OF SPOUSE, DEPENDENT, OR TR	If yes, complete and attach Schedule V.	Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?	if yes, complete and attach Schedule IV.	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?	If yes, complete and attach Schedule III.	Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1.000 at the end of the period?	If yes, complete and attach Schedule II.	Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?	If yes, complete and attach Schedule I.	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	Annual (May 15)	Member of the U.S. State: CA House of Representatives District: 16	(Full Name)	Zoe Lofgren	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT
ıssets, "unearned" in n? Do not answer "y	oved by the Commit	UST INFORM.		Yes No		Yes V No		Yes V No		Yes No 🗸		90 Yes ☑ No 🖂	H OF THESE	☐ Termination				NTATIVES TEMENT
Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	tee on Ethics and certain other "excepted trusts" need not be ist benefiting you, your spouse, or dependent child?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	schedule attached for each "Yes" response.	Each question in this part must be answered and the appropriate	If yes, complete and attach Schedule IX.	Did you have any reportable agreement or arrangement with an outside IX. entity?	If yes, complete and attach Schedule VIII.	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	If yes, complete and attach Schedule VII.	Did you, your spouse, or a dependent child receive any reportable travel VII. or relimbursements for travel in the reporting period (worth more than	If yes, complete and attach Schedule VI.	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt?	QUESTIONS	Termination Date:	Officer Or Employing Office: Employee	(Daytime Telephone)	(202) 225-3072	FORM A Page 1 of 12 For use by Members, officers, and employees
d Yes: No V	Yes 🗌 No 🗸	TIONS		and the appropriate		outside Yes 🗸 No [		Ing in the Yes 🗸 No 🛭		e travef		legift in herwise Yes [		more than 30 days late.	A \$200 penalty shall be assessed against anyone who files	S (Office Use Only)	2011 JUL 13 PM 3	HAND DEL

### SCHEDULE I - EARNED INCOME

John Marshall Collins, P.C.

Spouse Salary

N N Name Zoe Lofgren

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.	Amount	Туре	Source
	by the U.S. Government) totaling \$200 or more urce for other spouse earned income exceeding	any source (other than the filer's current employment source and amount of any honoraria; list only the so	List the source, type, and amount of earned income from a during the preceding calendar year. For a spouse, list the \$1,000.

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D" INCOME Name Zoe Lofgren

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ICMARC - Fidelity Diversified Int'I	ICMARC - Fidelity Contrafund	ICMARC - Aston/Optimum Mid Cap Equity	ICMARC - Am Funds Inv Co of America	California Public Employee Retirement System	activities, and its geographic location in Block A.  Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.  Provide complete names of stocks and mutual funds (do not use ticker symbols.)  For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.  For rental or other real property held for investment, provide a complete address.
\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$15,001 - \$50,000	\$100,001 - \$250,000			Year-End Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. It an asset was sold and is included only because it is generated income, the value should be "None."
CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	INTEREST			BLOCK C  Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.
\$2,501 - \$5,000	\$2,501 - \$5,000	\$1,001 - \$2,500	\$1,001 - \$2,500	\$5,001 - \$15,000			Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.
							Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

SP	SP	SP	SP	Sp P	SP			<u>-</u>		SCHEDU
John Marshall Collins Retirement Account - Artisan Fund International Fund	John Marshall Collins PC - Stock - Wells Fargo Funds Trust Advantage Ultra Short Term Income Fund Class A	John Marshall Collins PC - Stock - Vanguard Short Term Bond Index Fund Investor Shares	John Marshall Collins PC - Stock - Templeton Global Bond Fund Class A	John Marshall Collins PC - Stock - Dreyfus Basic Money Market	John Marshall Collins PC - Stock - Delaware Pooled Trust Diversified Income Fund Class A	ICMARC - VantageTrust PLUS Fund	ICMARC - T. Rowe Price Small- Cp Stk	ICMARC - T. Rowe Price Sm- Cp Value	ICMARC - Perkins Mid Cap Value I	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$15,001 - \$50,000	\$50,001 - \$100,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$15,001 - \$50,000	\$100,001 - \$250,000	\$100,001 - \$250,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	Name Zoe Lofgren
DIVIDENDS	INTEREST	INTEREST	INTEREST	NONE	INTEREST	CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	CAPITAL GAINS/DIVIDEN DS	gren
\$1 - \$200	\$1,001 - \$2,500	\$1,001 - \$2,500	\$5,001 - \$15,000	NONE	\$5,001 - \$15,000	\$1,001 - \$2,500	\$1,001 - \$2,500	\$201 - \$1,000	\$201 - \$1,000	
										Page 4 of 12

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Zoe Lofgren		Page 5 of 12
SP	John Marshall Collins Retirement Account - Dodge &	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	ס"
_	Cox Funds International Stock Fund	_			
SP	John Marshall Collins Retirement Account - Dodge & Cox Income Fund	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	<u> </u>
SP	John Marshall Collins Retirement Account - Dreyfus Basic Money Market	\$1,001 - \$15,000	NONE	NONE	
SP	John Marshall Collins Retirement Account - Fleming Cap Mutual Fund Group JP Morgan Mid Cap Value Fund Class I	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	ר
SP	John Marshall Collins Retirement Account - Goldman Sachs Trust Strategic Growth Opportunities Fund Institutional	\$1,001 - \$15,000	NONE	NONE	
SP	John Marshall Collins Retirement Account - Harbor Fund Cap Appreciation Fund Institutional Class	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	₩
SP	John Marshall Collins Retirement Account - Hartford Mutual Funds Cap Appreciation Fund Class A	\$15,001 - \$50,000	NONE	NONE	
SP	John Marshall Collins Retirement Account - Hussman Investment Trust Strategic Growth Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	<b>ס</b> ״

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Zoe Lofgren	ofgren		Page 6 of 12
SP	John Marshall Collins Retirement Account -	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	ס
<b>-</b>	Oppenheimer Developing Markets Fund Class A	_	_		-
SP	John Marshall Collins Retirement Account - PIMCO	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	<b>ס</b> י
•	Funds Total Return Fund Class P	-	-	-	-
SP	John Marshall Collins Retirement Account -	\$15,001 - \$50,000	NONE	NONE	ס
-	PowerShares DB Commodity Index Tracking Fund ETF	_		<u>-</u>	_
SP	John Marshall Collins Retirement Account - Principal Fund High Yield Fund Class A	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	ס
SP	John Marshall Collins Retirement Account - Royce	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	ס
	Fund Pennsylvania Mutual Fund Investment Class		_		
SP	John Marshall Collins Retirement Account - Rydex Series Funds Managed Futures Strategy Class A	\$1,001 - \$15,000	NONE	NONE	U
SP	John Marshall Collins Retirement Account - SPDR	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	טר
•	Index Shares Fund Dow Jones International Real Estate ETF	_	-	_	
Sp	John Marshall Collins Retirement Account - T Rowe Price Short-Term Bond Fund	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	ס

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# SCHEDULE III - ASSETS AND "UNEARNED" INCOME Name Zoe Lofgren

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	OME Name Zoe Lofgren	fgren		Page 7 of 12
Sp	John Marshall Collins Retirement Account -	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	ס
	Templeton Global Investment Trust Global Bond Fund Advisor Class	-	•		-
SP	John Marshall Collins Retirement Account - Vanguard REIT ETF	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	70
SP	Wells Fargo & Co Cash Swe/WF Advantage Money Market	\$0	INTEREST	\$5,001 - \$15,000	
Ļ	Wells Fargo Checking Account	\$15,001 - \$50,000	INTEREST	\$1 - \$200	
SP	Wells Fargo IRA: Wells Fargo Bank Market Linked CD, Maturity Date 11/7/2011	\$15,001 - \$50,000	NONE	NONE	
JT	Wells Fargo Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	

#### **SCHEDULE IV - TRANSACTIONS**

Name Zoe Lofgren

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

D SP,		Type of	Capital Gain in Excess		
-	Asset	HOHOME	01 42001	Date	
SP	John Marshall Collins Retirement Account - Artisan Fund International Fund	P	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - Dodge & Cox Funds International Stock Fund	P .	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - Dodge & Cox Income Fund	ס	N/A	04-21-10	\$15,001 - \$50,000
dS P	John Marshall Collins Retirement Account - Fleming Cap Mutual Fund Group JP Morgan Mid Cap Value Fund Class I	P	N/A	04-21-10	\$1,001 - \$15,000
Sp	John Marshall Collins Retirement Account - Goldman Sachs Trust Strategic Growth Opportunities Fund Institutional	ס	N/A	04-21-10	\$1,001 - \$15,000
SP.	John Marshall Collins Retirement Account - Harbor Fund Cap Appreciation Fund Institutional Class	P	N/A	04-21-10	\$15,001 - \$50,000
g <sub>P</sub>	John Marshall Collins Retirement Account - Hartford Mutual Funds Cap Appreciation Fund Class A	ס	N/A	04-21-10	\$15,001 - \$50,000
SP	John Marshall Collins Retirement Account - Hussman Investment Trust Strategic Growth Fund	ס	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - Oppenheimer Developing Markets Fund Class A	ס	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - PIMCO Funds Total Return Fund Class P	P	N/A	04-21-10	\$15,001 - \$50,000

#### **SCHEDULE IV - TRANSACTIONS**

Name Zoe Lofgren

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

			,		
SP, DC,		Type of	Capital Gain in Excess		
JT	Asset	Transaction	of \$2007	Date	Amount of Transaction
SP	John Marshall Collins Retirement Account - PowerShares DB Commodity Index Tracking Fund ETF	P	N/A	04-21-10	\$15,001 - \$50,000
SP	John Marshall Collins Retirement Account - Principal Fund High Yield Fund Class A	ס	N/A	04-21-10	\$15,001 - \$50,000
SP	John Marshall Collins Retirement Account - Royce Fund Pennsylvania Mutual Fund Investment Class	ס	N/A	04-21-10	\$1,001 - \$15,000
-Sb	John Marshall Collins Retirement Account - Rydex Series Funds Managed Futures Strategy Class A	Ū	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - SPDR Index Shares Fund Dow Jones International Real Estate ETF	ס	N/A	04-21-10	\$1,001 - \$15,000
SP	John Marshall Collins Retirement Account - T Rowe Price Short-Term Bond Fund	ס	N/A	04-21-10	\$15,001 - \$50,000
SP	John Marshall Collins Retirement Account - Templeton Global Investment Trust Global Bond Fund Advisor Class	P	N/A	04-21-10	\$15,001 - \$50,000
SP	John Marshall Collins Retirement Account - Vanguard REIT ETF	ס	N/A	04-21-10	\$15,001 - \$50,000
SP	Wells Fargo & Co Cash Swe/WF Advantage Money Market		N/A	04-21-10	- \$500,001 - \$1,000,000

## SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Zoe Lofgren

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spouse or dependent child that is totally independent of his or her relationship to you. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the

Source	Date(s)	Point of Departure DestinationPoint of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Food? Member Included? (Y/N) (Y/N)	Days not at sponsor's expense
Aspen Institute Congressional Program	Feb. 15-21	Feb. 15-21 DC-Madrid-DC	Υ	Υ	Υ	None
Aspen Institute Congressional Program	Apr. 5-11	SF-Lisbon-SF	~	Υ	Υ	None
Aspen Institute Congressional Program	May 31 - Jun. 7	SF-Tunis-DC	<b>~</b>	Y	Υ	None
The Colbert Report	Aug. 19-20	Rhinecliff, NY-Kingston, NY- New York, NY	~	<b>Y</b>	Z	None

#### **SCHEDULE VIII - POSITIONS**

Name Zoe Lofgren

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Santa Clara University School of Law Board of Visitors
Board Member	Santa Clara University School of Law Dean's High Tech Advisory Council
Ex Officio Board Member (Resigned as of April 22, 2010)	The Tech Museum of Innovation
Advisory Board Member	Santa Clara Computer & High Technology Law Journal; Santa Clara University School of Law
Advisory Board Member	Pacific Community Ventures
Advisory Board Member	Silicon Valley Education Foundation (Formerly Known as San Jose Education Foundation)
Advisory Board Member	Santa Clara County Superior Court – Project Advisory Committee
Advisory Board Member	Campbell Veteran Memorial Foundation (Joined June 2, 2010)

#### **SCHEDULE IX - AGREEMENTS**

Name Zoe Lofgren

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1981 to Present	California Public Employee Retirement System (through County of Santa Clara)	Continuing Membership (Vested); No Continuing Contribution by Employer or Employee
1981 to Present	ICMARC (through County of Santa Clara)	Savings Plan; No Contribution by Employer or Employee